PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



			or]	<u>Fax</u> (703) 746-4000					
INSTRUCTIONS: This fo appropriate. All further co- indicated unless corrected maintenance fee notification	below or directed otherwise	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and rders and not specifying	PUBLICATION FEE (if requification of maintenance fees a new correspondence address	nired). Blocks 1 through 4 s will be mailed to the current ; and/or (b) indicating a sep	hould be completed where correspondence address as arate "FEE ADDRESS" for			
•	CE ADDRESS (Note: Legibly mark-u 590 03/10/2004	with any corrections o	Fee(s) Transmittal. The	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
QUARLES & BI FIRSTAR PLAZA P.O BOX 2113 SU MADISON, WI 53	., ONE SOUTH PINCE JITE 600 /	NEY STREET	3017	Ce I hereby certify that it States Postal Service addressed to the Ma transmitted to the USI	rtificate of Mailing or Tran his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address TO, on the date indicated be	smission g deposited with the United st class mail in an envelope above, or being facsimile low.			
, , , , , , , , , , , , , , , , , , , ,	PA	JUN 1 0 20	04 (4)	Nicholas		(Depositor's name)			
	E.			Mu		(Signature)			
	PATER	<u>چ</u> ک	, SEE	June 8 /	2004	(Date)			
APPLICATION NO.	FILING DATE	ADEMAS!	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.			
09/460,324	12/10/1999		KENNETH	I J. KASHA	411044.9002	2350			
TITLE OF INVENTION: E	MBRYOGENESIS AND PL	ANT REGENERA	ATION FROM	M MICROSPORES					
•									
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	nonprovisional NO)	\$0	\$1330	06/10/2004			
EXAMINER		ART UNIT		CLASS-SUBCLASS]				
GRUNBERG,	1661	,	435-468000						
1. Change of correspondence CFR 1.363).	e address or indication of "F	ee Address" (37	names of	nting on the patent front page, up to 3 registered patent a	ttorneys or 1 Quar 1	es & Brady LLP			
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
U "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.									
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	Γ (print or type)					
PLEASE NOTE: Unless been previously submitte (A) NAME OF ASSIGN				ar on the patent. Inclusion of a Completion of this form is NO CE: (CITY and STATE OR CO		ate when an assignment has ignment.			
University of G		•	•	ntario Canada	,				
,	•		-						
Please check the appropriate	e assignee category or catego	ries (will not be pr	inted on the p	oatent); u individual XX	corporation or other private g	roup entity			

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.

□ Payment by credit card. Form PTO-2038 is attached.

(Authorized Signature (Date) June 2004 NOTE: The Issue Fee and Partication Fee (if required) will not be accepted from anyone other than the applicant a registered attorney or agent; or the assignee or other party in interest as shown by the coords of the United States Patent and Trademark Office.

10

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

06/14/2004 ZJUHAR2 00000091 170055 09460324

01 FC:1501 1330.00 DA 300.00 DA 02 FC:1504 03 FC:8001 30.00 DA

X The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 17.-0053 (enclose an extra copy of this form).

4a. The following fee(s) are enclosed:

X Advance Order - # of Copies

X Issue Fee

X Publication Fee



Complete if Known

PTO/SB/17 (10-03)

Express Mail No.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL						Complete if Known							
						Application Number 09/460,324							
for FY 2004						Filing Date			12/1	12/10/1999			
Effective 10/01/2003. Patent fees are subject to annual revision.						First Named Inventor			_{itor} Ken	Kenneth J. Kasha			
<u> </u>					-	Examiner Name			Ann	e Marie G	Grunberg		
Applicant claims small entity status. See 37 CFR 1.27					Art Unit 1661			1					
TOTAL AMOUNT OF PAYMENT (\$) 1,360.00						Attorney Docket No. 411044,90021							
METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)								
Check Credit card Money Other None						3. ADDITIONAL FEES Large Entity Small Entity							
Deposit Account:						Fee		Entity Fee	_				
Deposit Account 17-0055				Fee Code		Code		Fe	e Descript	ion	Fee Paid		
Number	Number				1051 1052	130	2051		-	late filing fee			
Deposit Account Quarles & Brady LLP						50	2052	25	Surcharge - cover sheet	late provision	al filing fee or		
Name The Director is authorized to: (check all that apply)					1053	130	1053		Non-English	•			
						2,520	1812	•	_	•	parte reexamination	i	
Charge any additional fee(s) or any underpayment of fee(s)					1804	920*	1804	920*	Requesting processing	oublication of tion	SIR prior to		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.					1805	1,840*	1805	1,840*	Requesting Examiner ac	publication of ction	SIR after		
FEE CALCULATION				1251	110	2251	55		r reply within				
1. BASIC FILING FEE				1252	420	2252	210			second month			
Large Entity Si	mall Enti		ee Description	Fee Paid	1253	950	2253			or reply within			
	ode (\$)	<u> </u>	se bescription	, , , ,		1,480	2254	740		or reply within			
	2001 38		Utility filing fee			2,010	2255			or reply within	iiiti montii		
	2002 17		Design filing fee		1401	330	2401		Notice of Ap	•			
	2003 26		Plant filing fee		1402 1403	330 290	2402 2403		Request for	f in support of oral bearing	an appeal	<u> </u>	
	2004 38		Reissue filing fee			1,510			•	_	ic use proceeding		
1005 160 2	2005 8	_	Provisional filing		1452	110	2452			evive - unavoi	-	<u> </u>	
SUBTOTAL (1) (\$) 0.00						1,330	2453			evive - uninte			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE						1,330	2501			fee (or reissu		1330	
		E	x <u>tra Claim</u> s	ee from Fee Paid	1502	480	2502		Design issue	•	-,		
Total Claims				1503	640	2503		Plant issue					
				1460	130	1460	130	Petitions to	the Commiss	ioner			
				1807	50	1807	50	Processing	fee under 37	CFR 1.17(q)			
Large Entity					1806	180	1806				Disclosure Stmt		
Fee Fee Code (\$)	Fee Code	Fee (\$)	Fee Descript	<u>ion</u>	8021	40	8021	40	Recording e	ach patent as	signment per		
1202 18	2202	9	Claims in exces	s of 20	1809	770	2809		property (tirr	nes number of mission after t	r properties)		
1201 86	2201		•	ims in excess of 3					(37 ČFR 1.1	29(a))	•		
1203 290 1204 86	2203 2204	145 43	** Reissue inde		1810	770			examined (3	ditional invention of the district of the dist	(b))		
over original patent		1801		2801		·=		xamination (RCE)	I				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent				1802	of a design application						 		
SUBTOTAL (2) (\$) 0.00						Other fee (specify) 8001 Advance Order 30							
**or number previously paid, if greater; For Reissues, see above						uced by	Basic F	filing F	ee Paid	SUBTOTA	AL (3) (\$) 1,36	0.00	
SUBMITTED BY (Complete (if applicable))													
Name (Print/Type) Nicholas J Seay						Registration No. (Attorney/Agent) 27,386 Telephone 608/251-5000				0			
Signature							- AF:///	_		Date	June 8, 200	4	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.